## MISSOURI SOUTHERN

## **VETERAN REGISTRATION AND CERTIFICATION FORM**

NAME:				SSN:		MSSU SID#: S00	
	Last,	First	Middle				
ADDRESS:						ONE:	
	Street		City	State	Zip		
MSSU EMAIL:@mymail.mssu.edu ALT. EMAIL:							
STUDENT STATUS:	□ New □	Continuing	Transfer SEM	IESTER: 🗆 Fall	□ Spring □ Sum	mer YEAR: 20	
CURRENT MILITARY STATUS: Active Duty Veteran Reservist National Guard Spouse Dependent BRANCH:							
EDUCATIONAL BENEFIT YOU ARE ELIGIBLE TO RECEIVE: (Check One)   CH 30 - Montgomery GI Bill® (Prior or Active Duty) CH 1606 - Montgomery GI Bill® (Reserve or National Guard)   CH 31 - Vocational Rehabilitation (Service Connected Disability) CH 1607 - Reserve Educational Assistance Program (REAP)   CH 33 - Post 9/11 GI Bill®% CH 35 - Dependents' Education Assistance Program (DEA)   CH 33 - Post 9/11 GI Bill® (TOE or FRY / Dependents)% DEA Veteran's SSN:							
Are you currently Active Duty, Reserve or National Guard? If yes, will you be using Military Tuition Assistance this semester? Yes No If yes, what type? State TA Federal TA							
Are you transferring VA education benefits from another school? 🗆 Yes 🗆 No If yes, you must complete VA Form 22-1995 or 22-5495							
LEVEL OF DEGREE SEEKING: Masters Bachelors Associates Certification/Certificate							
MAJOR: Check here if major has changed since last semester						since last semester	
MINOR:				_ Check here	if minor has changed	since last semester	
Have you requ	ested college th	ranscripts be sent	to MSSU? Tyes	No Have you ap	pplied for Financial A	id at MSSU? 🛛 Yes 🗌 No	

## I UNDERSTAND...

- ▶ I will provide a copy of my DD-214 Member 4 Copy and VA Certificate of Eligibility Letter to Veteran Services.
- > I will be enrolled in an approved program of study and ensure that all classes I take are required for my degree plan.
- > I will attend class, make satisfactory progress, and maintain a 2.0 grade point average.
- ▶ I will report any changes in my enrollment (add, drop or withdrawal) to the School Certifying Official.
- > I will provide information to the Financial Aid Office regarding my military status, category and monthly rate of pay.
- > I will provide a copy of my State or Federal Tuition Assistance Authorization to Veteran Services and Bursar.
- ▶ I will be responsible for all tuition and fees, or the portion, not paid by my VA or TA education benefits.
- > I will complete this form and sign prior to every semester I wish to use my VA or TA education benefits.
- > By signing this form I authorize MSSU to certify my enrollment to the U.S. Department of Veteran Affairs.

Student Signature